

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(only for new nonprovisional applications under 37 CFR 1.53(d))

Attorney Docket No.	PRD-50-NP
First Inventor	Xiaoli Chen
Title	TREATING SYNDROME X WITH SUBSTITUTED TETRALINS AND INDANES
Express Mail Label No.	EV-065836526-US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(submit an original and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 120] <i>(Preferred arrangement set forth below)</i>	a. <input type="checkbox"/> Computer Readable Form (CRF)
- Descriptive Title of the Invention	b. <input type="checkbox"/> Specification Sequence Listing on:
- Cross Reference to Related Applications	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
- Statement Regarding Fed sponsored R&D	ii. <input type="checkbox"/> paper
- Reference to sequence listing, a table, or a computer program listing appendix	c. <input type="checkbox"/> Statement verifying identity of above copies
- Background of the Invention	ACCOMPANYING APPLICATION PARTS
- Brief Summary of the Invention	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
- Brief Description of the Drawings (<i>if filed</i>)	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (<i>when there is an assignee</i>)
- Detailed Description	11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)
- Claim(s)	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
- Abstract of the Disclosure	13. <input type="checkbox"/> Preliminary Amendment
4. <input type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets]	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
5. Oath or Declaration [Total Pages 4]	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (<i>if foreign priority is claimed</i>)
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i>	17. <input type="checkbox"/> Other
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	18. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: , filed . Prior application information: Examiner Group Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	19. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 or <input type="checkbox"/> Correspondence Address below

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-Part (CIP) of prior application No.: , filed .

Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label 000027777 or Correspondence Address below

Name: Philip S. Johnson, Esq.

Address: Johnson & Johnson

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20. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to Evelyn D. Shen at:

Telephone: (732) 524-6040 Fax: (732) 524-2808

21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Evelyn D. Shen	Reg. No. 39,834
SIGNATURE		
DATE	October 17, 2003	

16235 U.S.P.T.O.
10/688572
10/170380

FEE TRANSMITTAL

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	Xia li Ch n
Group Art Unit	
Examiner Name	
Attorney Docket Number	PRD-50-NP

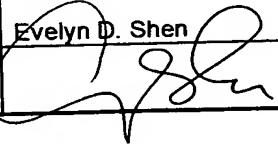
FEE CALCULATION**CLAIMS AS FILED**

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	51 - 20 =	31	x 18.00	\$ 558.00
INDEPENDENT CLAIMS	2 - 3 =	0	x 84.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	☒	N/A	\$290.00	290.00
			TOTAL FEES	\$ 1,618.00

METHOD OF PAYMENT

Please charge Deposit Account No. 10-0750/PRD-50-NP/EDS in the amount of \$1,618.00.
Three copies of this sheet are enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/PRD-50-NP/EDS. Three copies of this sheet are enclosed.

SUBMITTED BY:		Complete (if applicable)
Typed or Printed Name	Evelyn D. Shen	Reg. No. 39,834
Signature		Date: October 17, 2003
		Deposit Account No. 10-0750

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Xiaoli Chen et al.

For : TREATING SYNDROME X WITH SUBSTITUTED TETRALINS AND
INDANES

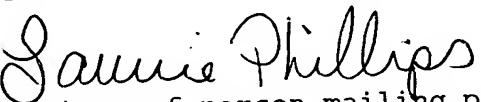
Express Mail Certificate

"Express Mail" mailing number: EV-065836526-US

Date of Deposit: October 17, 2003

I hereby certify that this complete application, including specification pages, claims, Executed Declaration and Power of Attorney, and Assignment, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Laurie Philips
(Typed or printed name of person mailing paper or fee)


(Signature of person mailing paper or fee)